

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS   | ID NO.     | DATE            |
|---------------------------|------------|------------|-----------------|
| FEE DETERMINATION         |            |            |                 |
| O.I.P.E. CLASSIFIER       | <i>LS</i>  | <i>32</i>  | <i>2/30</i>     |
| FORMALITY REVIEW          | <i>H.T</i> | <i>913</i> | <i>64/24/81</i> |
| RESPONSE FORMALITY REVIEW |            |            |                 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date |
|----------------|------|
| Final Original |      |
| 1              | ✓    |
| 2              | ✓    |
| 3              | ✓    |
| 4              | ✓    |
| 5              | ✓    |
| 6              | ✓    |
| 7              | ✓    |
| 8              | ✓    |
| 9              | ✓    |
| 10             | ✓    |
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| Claim          | Date |
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| Claim          | Date |
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| Final Original |      |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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*4/24*